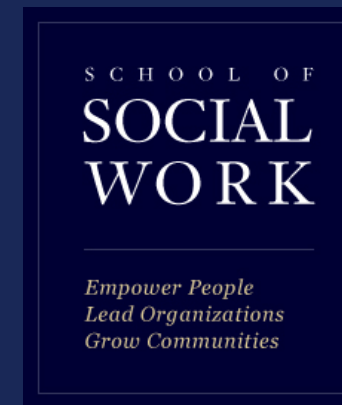


ADHERENCE TO A TELEHEALTH PROTOCOL FOR PATIENTS DISCHARGED WITH CONGESTIVE HEART FAILURE

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INTRODUCTION

- Congestive Heart Failure (CHF) is the leading cause of hospital readmissions
- Telehealth protocols hold promise for reducing readmission; however, they can be complex and poorly utilized by individuals at risk for readmission
- The purpose of the project was to assess adherence to a telehealth protocol that combines (1) state-of-the-art medical protocols and (2) real-time support from social workers

METHODS

- We recruited 50 patients with CHF from a regional managed care organization
- Patients were provided with computer tablets
- Specialized software allowed for (1) real time reporting of health status; (2) an interface engaging patients in CHF self-care; and (3) HIPAA-compliant video conferencing to enable frequent contact
- Adherence was defined as the percentage of days of the 120-day protocol on which the patient successfully completed the intervention protocol

RESULTS

- Nearly all (96%, N=48) patients completed the 120-day protocol
- Median protocol adherence for the complete 120 day period was 96% (IQR = 92-98%)
- Wilcoxon rank-sum tests showed that adherence was not different across any of the key patient characteristics
- Adherence did not significantly decrease over the course of the 120 days



DISCUSSION

- Combining technology with best practices for at-risk populations, telehealth programs can be developed that maintain excellent adherence
- This is true even for individuals at high risk for readmission such as those with depression, poor cognitive ability, and living alone

Characteristic	N (%)	Median (IQR) Engagement ^a at 120 days
Sex		
Male	14 (29)	96 (93, 98)
Female	34 (71)	96 (89, 98)
Race		
White	22 (46)	95 (86, 98)
Black	26 (54)	96 (93, 98)
Age		
<65	30 (63)	96 (92, 98)
65 and up	18 (38)	95 (93, 98)
Lives Alone		
No	29 (60)	95 (92, 98)
Yes	19 (40)	96 (93, 98)
Medicaid and Medicare		
No	16 (33)	96 (89, 98)
Yes	32 (67)	96 (92, 98)
PHQ-2 Depression Screen		
Negative	37 (77)	96 (93, 98)
Positive	11 (23)	96 (86, 97)
Mini-Cognitive Battery		
Negative	38 (79)	96 (93, 98)
Positive	10 (21)	93 (86, 95)
LACE ^b		
0-10	26 (54)	97 (86, 98)
11 or more	22 (46)	95 (93, 98)
Fall Risk		
No	29 (60)	97 (93, 98)
Yes	19 (40)	94 (86, 98)

Abbreviations: PHQ-2, patient health questionnaire screening instrument; LACE, Length of stay / Acute admission / Comorbidities / Emergency department visits in past month.

^a Engagement was defined as the percentage of days since discharge on which the patient successfully completed the intervention protocol.

^b Higher LACE scores indicate greater likelihood of readmission.